

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

☐ Amended

IN THE MATTER OF

**Order and Notice for
Hearing on Petition
Objecting to Transfer of
Protective Placement**

Case No. _____

Date of Birth _____

A Petition Objecting to Transfer of Protective Placement has been filed by (name): _____

A hearing must be held **within 10 days** of the filing date of the petition.**THE COURT ORDERS THAT:**

The petition be heard before _____, Court Official,
on (date) _____, at (time) _____ or when scheduled thereafter
at (location): _____

**If you need help in this matter because of a
disability, please call:**

☐ **Please check with attorney below for exact
time and date.**

BY THE COURT:_____
Circuit Court Judge/Court Commissioner_____
Name Printed or Typed_____
Date

Name of Attorney

Address

Telephone Number

Bar Number

Original: Court

Copies: Petitioner

Guardian

County Department or agency with which it contracts.

Individual under protective placement

Individual's attorney, if any